## WYOMING WORKERS' SAFETY & COMPENSATION

EMPLOYER:	EMPLOYER #:	
	FIDAVIT FOR APPLICATION OF COVERAGE RICAL OFFICE OCCUPATION CLASSIFICATION	
Chapter 1, Section 4 Occupations" as foll	(e) of the Wyoming Workers' Compensation Rules & regulations defines "Clerical Office ows:	
are engaged of any natur Office Occ performance Employees away from classification	whose duties are confined to keeping the books and records of the business or who wholly in office work where such books and records are kept, having no other duties e in or about the premises of the business. Employees who qualify for the Clerical upation classification may include personnel with supervisory duties if the of those duties does not require any work away from the office environment. Qualifying for the Clerical Office Occupation classification who perform any duty the office environment become disqualified for the Clerical Office Occupation in the reporting period when the non-clerical work is performed, with a limited lowed solely for direct travel to and from a local post office or bank.	
HOW TO OF	BTAIN AN CLERICAL OFFICE OCCUPATION CLASSIFICATION	
The firm may need	tion requested on the reverse side, read the following statements and sign the space below. to attach additional sheets to completely describe all job titles subject to the application for pations. Submit the signed copy to any of the Division's field offices or send to:	
	WYOMING WORKERS' SAFETY & COMPENSATION EMPLOYER SERVICES REGISTRATION UNIT 1510 EAST PERSHING BLVD CHEYENNE WY 82002	
IT IS UNDERSTO	OD:	
-	only report employees who qualify for the Clerical Office occupation classification under on the payroll report forms;	
any location other th	e who is otherwise qualified to be reported as a clerical employee and who travels locally to nan the post office or bank, or who travels to a non-local place is thereby disqualified to be cal Office Occupation classification for the reporting period when this travel occurs;	
<b>THAT</b> any over reporting of payroll in the Clerical Office occupation classification discovered by the Division will be reassigned to the correct classification. Additional premiums may be charged if applicable.		

Title

Date

Signature

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		FIDAVIT FOR APPLICATION OF COVERAGE ICAL OFFICE OCCUPATION CLASSIFICATION	
belo	w, the term "en	questions completely and return to any Division office. As used in the questions apployees" is reference to those employees whom the firm wishes to report under the upation classification.	
1.	YES / NO	Are employees duties confined to keeping the books and records of the business? If the answer to question #1 is <b>NO</b> , describe the duties that are other than keeping the books and records of the business:	
2.	YES / NO	Are employees engaged wholly in office work where such books and records are kept? If the answer to question #2 is <b>NO</b> , describe the duties that remove the employee away from the office where such books and records are kept, and indicate how often the employee is removed from the office environment:	
3.	Occupations	st of the <b>JOB TITLES</b> for whom the firm is applying to obtain a Clerical Office classification. For each <b>JOB TITLE</b> , include a brief description of the job duties, ble, attach a job description used by the firm:	
JOB	B TITLE:		
DES	SCRIPTION O	F JOB DUTIES:	
JOB	B TITLE:		
DES	SCRIPTION O	F JOB DUTIES:	

Attach additional sheets as necessary.